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CONFIRMATION NO. 2822

<b>SERIAL NUMBER</b> 10/603,372	<b>FILING OR 371(c) DATE</b> 06/25/2003 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2618	<b>ATTORNEY DOCKET NO.</b> 40006923-0015-005
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**APPLICANTS**

Yaron Knobel, Givat-Shmuel, ISRAEL;  
 Gadi Shor, Tel-Aviv, ISRAEL;  
 David Yaish, Tel-Aviv, ISRAEL;  
 Sorin Goldenberg, Ness-Ziona, ISRAEL;  
 Amir Krause, Ramat-Gen, ISRAEL;  
 Erez Wienberger, Tel-Aviv, ISRAEL;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/389,789 03/17/2003 which claims benefit of 60/404,070 08/16/2002 and claims benefit of 60/450,737 02/28/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
 \*\* 09/11/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <u>WAM</u> Initials:	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 80	<b>INDEPENDENT CLAIMS</b> 9
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**ADDRESS**

26263

**TITLE**

Multi-band ultra-wide band communication method and system

<b>FILING FEE RECEIVED</b> 1167	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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